

# FEC FORM 3

## REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED  
SECRETARY OF THE SENATE  
PUBLIC RECORDS

15 OCT 21 PM 4:21

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

C O N N O R S F O R S E N A T E

ADDRESS (number and street)

3 0 0 1 F A I R F A X R O A D

Check if different  
than previously  
reported. (ACC)

C L E V E L A N D H E I G H T S

O H

4 4 1 1 8

CITY ▲

STATE ▲

ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼

C 0 0 5 8 2 4 9 4

3. IS THIS  
REPORT

☒

NEW  
(N)

OR

AMENDED  
(A)

STATE ▼ DISTRICT

O H

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

☒ October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on M M D D Y Y

in the  
State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on M M D D Y Y

in the  
State of

5. Covering Period

M M D D Y Y Y Y  
0 6 2 9 2 0 1 5

through

M M D D Y Y Y Y  
1 0 1 5 2 0 1 5

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer MICHAEL G. CONNORS

Signature of Treasurer

*Michael G. Connors*

Date

M M D D Y Y Y Y  
1 0 1 5 2 0 1 5

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. §30109.

Office  
Use  
Only

FEC FORM 3  
(Revised 02/2003)